



GEORGIA MEDICAID FEE-FOR-SERVICE OPIOID DEPENDENCY AGENTS PA SUMMARY

Preferred	Non-Preferred
Buprenorphine generic Suboxone (buprenorphine/naloxone)	Bunavail (buprenorphine/naloxone) Buprenorphine/naloxone generic Lucemyra (lofexidine) Zubsolv (buprenorphine/naloxone)

LENGTH OF AUTHORIZATION: Varies

NOTE:

- Preferred agents do not require prior authorization, except in situations where they are being prescribed concurrently with opioid analgesics.
- Concurrent therapy of medications in this class with opioids requires the prescriber to submit a written letter of medical necessity stating the reasons the member requires concurrent therapy with opioids.

PA CRITERIA

Bunavail, Buprenorphine/Naloxone Generic and Zubsolv

- ❖ For members 16 years of age or older with a diagnosis of opioid dependence when prescribed by a Drug Addiction Treatment Act 2000 (DATA) waived practitioner, prescriber must submit a written letter of medical necessity stating the reasons the preferred product, brand Suboxone, is not appropriate for the member.

Lucemyra

- ❖ Approvable for members 18 years of age or older with a diagnosis of opioid dependency when used for mitigation of opioid withdrawal symptoms to facilitate abrupt opioid discontinuation who were started on the medication in an inpatient facility or who have an allergy, contraindication, drug-drug interaction or intolerable side effect to the preferred product, Suboxone.

EXCEPTIONS:

- Exceptions to these conditions of coverage are considered through the prior authorization process.
- The Prior Authorization process may be initiated by calling **OptumRx at 1-866-525-5827**.

PREFERRED DRUG LIST:

- For online access to the Preferred Drug List (PDL), please go to <http://dch.georgia.gov/preferred-drug-lists>.



PA and APPEAL PROCESS:

- For online access to the PA process, please go to www.dch.georgia.gov/prior-authorization-process-and-criteria and click on Prior Authorization (PA) Request Process Guide.

QUANTITY LEVEL LIMITATIONS:

- For online access to the current Quantity Level Limits (QLL), please go to www.mmis.georgia.gov/portal, highlight Pharmacy and click on [Other Documents](#), then select the most recent quarters QLL List.